

## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450  
or Fax (571) 273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

7590

08/31/2005

TED R. RITTMASER  
FOLEY & LARDNER  
2029 CENTURY PARK EAST  
SUITE 3500  
LOS ANGELES, CA 90067-3021

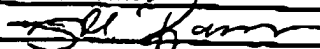
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## Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Jose Ramos

(Depositor's name)



(Signature)

November 23, 2005

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/034,627	12/27/2001	Michael E. Miller	047711-0282	9533

TITLE OF INVENTION: METHOD AND SYSTEM FOR NON-VASCULAR SENSOR IMPLANTATION

01/11/2006 MGBREK2 00000016 500872 10034627

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	03 PL TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	11/30/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
MENDEZ, MANUEL A	3763	604-891100

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

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2

3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

MEDTRONIC MINIMED, INC.

NORTHRIDGE, CA

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee  
☒ Publication Fee (No small entity discount permitted)  
☒ Advance Order - # of Copies 11

4b. Payment of Fee(s):

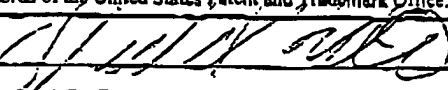
- ☒ A check in the amount of the fee(s) is enclosed.  
☐ Payment by credit card. Form PTO-2038 is attached.  
☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-0872 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant, a registered attorney or agent, or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature



Date November 23, 2005

Typed or printed name Ted R. Rittmaster

Registration No. 32,933

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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*FL*  
**FOLEY & LARDNER LLP**  
**ATTORNEYS AT LAW**

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 LOS ANGELES, CA 90067-3021  
 TELEPHONE: 310.277.2223  
 FACSIMILE: 310.557.8475  
 WWW.FOLEY.COM

## FACSIMILE TRANSMISSION

Total # of Pages (including this page) *4*

TO:	PHONE #:	FAX #:
Ms. Cynthia Streater COMMISSIONER FOR PATENTS - OIPE FEES	703-308-9010	703-308-7884

From : Jose Ramos

Email Address : jramos@foley.com

Sender's Direct Dial : 310.975.7896

Date : January 10, 2006

Client/Matter No : 047711-0282

User ID No : 4190

310.975.7896

### MESSAGE:

Dear Ms. Streater:

Following as requested is a copy of our return postcard date-stamped by the Patent Office confirming receipt of our payment of the Issue Fee for USSN 10/034,627. Also following is a copy of our Issue fee Transmittal Letter and Part B Fees Transmittal.

Thank you in advance for your attention to this matter.

Jose Ramos

If there are any problems with this transmission or if you have not received all of the pages, please call 310.277.2223, extension 8020.

Operator:	Time Sent:	Return Original To: Jose Ramos
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Atty Dckt No.: 047711-0282

Receipt is hereby acknowledged for the following in the U.S. Patent and Trademark Office:

Applicant: Michael E. MILLER, et al.  
Title: METHOD AND SYSTEM FOR NON-VASCULAR SENSOR IMPLANTATION  
Appl. No.: 10/034,627  
Filing Date: 12/27/2001

1. Issue Fee Transmittal Letter
2. Part B - Fee Transmittal
3. Check No. 948392 in the amount of \$1,733.00 for issue fee, publication fee and 11 soft copies

Mailing Date: November 23, 2005

Date Due: December 21, 2005



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Atty. Dkt. No. 047711-0282

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

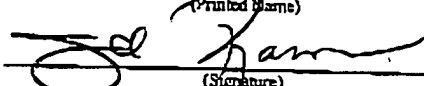
Applicant: Michael E. MILLER, et al.  
 Title: METHOD AND SYSTEM FOR  
 NON-VASCULAR SENSOR  
 IMPLANTATION

Appl. No.: 10/034,627

Filing Date: 12/27/2001

Examiner: Manuel A. Mendez

Art Unit: 3763

<p align="center"><b>CERTIFICATE OF MAILING</b></p> <p>I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date below.</p> <p align="center"><u>Jose Ramos</u> (Printed Name)</p> <p align="center"> (Signature)</p> <p align="center"><u>November 23, 2005</u> (Date of Deposit)</p>
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**ISSUE FEE TRANSMITTAL**

Mail Stop Issue Fee  
 Commissioner for Patents  
 P.O. Box 1450  
 Alexandria, VA 22313-1450

Sir:

The PTO did not receive the following  
 listed item(s) a check #1733.

Enclosed herewith please find Issue Fee Transmittal Form PTOL-85(B) along with a check in the amount of \$1,733.00 for payment of the Issue Fee, the Publication Fee and 11 additional copies of the issued utility patent.

The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.18, or credit any overpayment, to Deposit Account No. 50-0872. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 50-0872.

Respectfully submitted,

Date: November 23, 2005

FOLEY & LARDNER LLP

Customer Number: 23392

Telephone: (310) 975-7963

Facsimile: (310) 557-8475

By: 

Ted R. Rittmaster

Attorney for Applicant

Registration No. 32,933

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MAIL DATE CANCELLED